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Jack Doyle  
County Executive

## 2003 SUMMER EMPLOYMENT APPLICATION

Name \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_ Daytime Phone # \_\_\_\_\_ Alt. Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ Zip Code \_\_\_\_\_

Are you 18 years of age or older? ☐ yes ☐ no Have you received a High School or General Equivalency diploma? ☐ yes ☐ no

School attended above High School: \_\_\_\_\_  
Name Location Course Credits Completed Degree

When can you begin to work? Date: \_\_\_\_\_ Need to end work? Date: \_\_\_\_\_ Can you work weekends? ☐ yes ☐ no

Date(s) you are available for pre-employment drug testing: \_\_\_\_\_

### Please list previous employment (Include Monroe County):

Name of Employer	Employment Dates	Job Duties

### Position(s) you would accept:

**Parks:** ☐ Seasonal Laborer ☐ Lifeguard - Do you hold current certification? ☐ yes ☐ no

Park Preference: \_\_\_\_\_

**Aviation:** ☐ Seasonal Laborer

**Transportation:** ☐ Seasonal Laborer

**Environmental Services:** ☐ Laboratory Aide\* ☐ Environmental Aide\* (\* Applicants must include student transcript with application)

Have you ever been convicted of a felony? ☐ yes ☐ no – An answer of yes to this question will not in and of itself exclude you from employment.

Do you have a valid NYS Driver's license? ☐ yes ☐ no – If so, what class? \_\_\_\_\_

Can you obtain daily transportation to any work site in Monroe County? ☐ yes ☐ no

I declare, subject to the penalties and termination from employment, that the statements made in this application are true to the best of my knowledge. I further understand, and will otherwise submit thereto, that in accordance with the County's pre-employment drug testing program, I may be required to submit to a urinalysis test as a condition for employment.

Signature

Date